

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450	Application Number	09/580,495
	Filing Date	05/30/2000
	First Named Inventor	Graves <i>et al.</i>
	Group Art Unit	2633
	Examiner Name	Tran, Dzung D.
	Attorney Docket Number	7000-431

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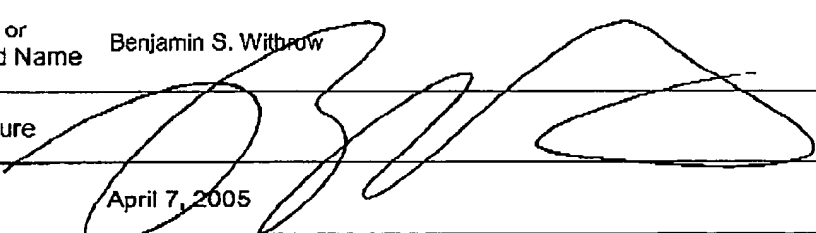
I am the :

☐ Applicant.

☐ Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed.

☒ Attorney or agent of record, Reg. No. 40,876.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

Typed or Printed Name	Benjamin S. Withrow
Signature	
Date	April 7, 2005

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".

☐ *Total of ___ forms are submitted.

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